

CA096600

**SHELBY COUNTY BOARD OF COMMISSIONERS
AGENDA ROUTE SHEET**

Referred to Commission Committee (name) Community Services

For Commission Action on (date) December 3, 2008

A RESOLUTION APPROVING THE ADDITIONAL APPROPRIATION OF FUNDS IN THE AMOUNT OF \$59,600.00 AS A TEN-PERCENT (10%) CONTINGENCY FUND FOR THE RENOVATION OF APPROXIMATELY 13,500 SQ. FT. OF SHELBY COUNTY HEAD START INTERIOR DEMOLITION & REMODELING. THIS ITEM REQUIRES EXPENDITURE OF FEDERAL GRANT FUNDS IN THE AMOUNT OF \$59,600.00. SPONSORED BY COMMISSIONER DAVID LILLARD.

CHECK ALL THAT APPLY BELOW:

_____ This Action does NOT require expenditure of funds.

X This Item requires/approves expenditure of funds as follows (complete all that apply):

County General Funds: \$ _____ : County CIP Funds: \$ _____

State Grant Funds: \$ _____ : State Gas Tax Funds: \$ _____

Federal Grant Funds: \$ 59,600.00

Other funds (Specify source and amount): \$ _____

Other pass-thru funds (Specify source and amount): \$ _____

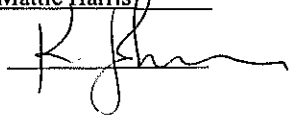
Originating Department: Community Services

APPROVAL:

Dept. Head:	_____	_____	_____
	(Type your name & phone #.)	(Initials)	(Date)
Elected Official:	_____	_____	_____
	(Type your name & phone #.)	(Initials)	(Date)
Division Director:	<u>Dottie Jones 545-4274</u>	<u>[Signature]</u>	<u>12/02/08</u>
	(Type your name & phone #.)	(Initials)	(Date)
CIP – A&F Director:	_____	_____	_____
	(Type your name & phone #.)	(Initials)	(Date)
Finance Dept.:	<u>Mike Swift</u>	<u>[Signature]</u>	<u>12/3/08</u>
	(Type your name & phone #.)	(Initials)	(Date)
County Attorney:	<u>[Signature]</u>	<u>[Signature]</u>	<u>12/3/08</u>
	(Type your name & phone #.)	(Initials)	(Date)
CAO/Mayor:	<u>James Huntzicker</u>	<u>[Signature]</u>	<u>12/3/08</u>
	(Type your name & phone #.)	(Initials)	(Date)

ITEM # _____

PREPARED BY: Mattie Harris

APPROVED BY: 

A RESOLUTION APPROVING THE ADDITIONAL APPROPRIATION OF FUNDS IN THE AMOUNT OF \$59,600.00 AS A TEN-PERCENT (10%) CONTINGENCY FUND FOR THE RENOVATION OF APPROXIMATELY 13,500 SQ. FT. OF SHELBY COUNTY HEAD START INTERIOR DEMOLITION & REMODELING. THIS ITEM REQUIRES EXPENDITURE OF FEDERAL GRANT FUNDS IN THE AMOUNT OF \$59,600.00. SPONSORED BY COMMISSIONER DAVID LILLARD.

WHEREAS, Shelby County entered into a contract with Barnes & Brower, Inc. for the renovation of a Head Start facility located at 3435 Ridge Meadow Parkway; and

WHEREAS, Additional funds of ten-percent of the original contract amount (\$59,600.00) are needed in a contingency fund to cover unforeseen conditions, such as exterior waterproofing and any other necessary changes in the scope of work; and

WHEREAS, Funds are available in the FY 2009 Operating Budget, Account Numbers 103-480350-7011 in the amount of \$59,600.00.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF SHELBY COUNTY, TENNESSEE, That the contingency fund in the amount of \$59,600.00 is hereby approved.

BE IT FURTHER RESOLVED, that the funds in the amount of \$59,600.00 are hereby appropriated from the approved FY 2009 Operating Budget, Line Item Number 103-480350-7011 Head Start.

BE IT FURTHER RESOLVED, That the County Mayor is hereby authorized to execute any and all documents necessary to comply with the intent of this resolution executed copies of which are to be placed on file in the Purchasing Department.

BE IT FURTHER RESOLVED, That the County Mayor and the Division Director of Administration and Finance are authorized to issue their warrant or warrants in an amount not to exceed \$59,600.00 for the purposes contained in this resolution and to take proper credit in their accounting therefor.

A C Wharton, Jr., County Mayor

Date: _____

ATTEST:

Clerk of County Commission

ADOPTED: _____

SUMMARY

I. Description of Item

This resolution authorizes a change order for the renovation of approximately 13,500 square feet of interior demolition & remodeling at the Head Start facility located at 3435 Ridge Meadow Parkway Memphis, TN 38115. This location will have nine (9) classrooms as well as administrative and parent spaces. 180 children will be served at this location. Services to these children and families are expected to begin January 1, 2009 pending project completion and licensing.

Inadvertently, the original contract contained no funding for contingencies. Additional funds of ten-percent of the original contract amount (\$59,600.00) are needed in a contingency fund to cover unforeseen conditions, such as exterior waterproofing and any other necessary changes in the scope of work. These items are critical to the timely completion of the renovation.

II. Sources and Amount of Funding Amount Expended/Budget line Item

Federal Department of Health and Human Services/Administration
For Children and Families. \$59,600.00

Budget Line Item – Head Start Operations and Maintenance
Account 103-480350-7011.

All Costs (Direct/Indirect)
100% Grant Fund Reimbursement of \$655,619.00

**Additional or Subsequent Obligations or Expenses of
Shelby County**
N/A

III. Contract Items

This resolution does not approve any contracts.

IV. Additional Information Relevant to Approval of this Item

Administration recommends approval of the resolution.

CONTRACT NO. CA _____

CONTRACT AND ENCUMBRANCE INFORMATION SHEET

AN ORIGINAL AND 1 COPY OF THIS FORM MUST BE SUBMITTED

THIS SHEET MUST BE COMPLETED, SIGNED BY THE DEPARTMENT HEAD AND DIVISION DIRECTOR AND ATTACHED TO ALL CONTRACT AND RESOLUTION PACKETS BEFORE ANY ACTION WILL BE TAKEN.

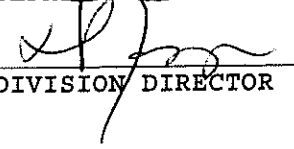
1. Department Requesting Services: Head Start
2. Preparer's Name, Telephone #, and E-Mail Address:
Mattie Harris 922-0725 harris-m@scgheadstart.com
3. DESCRIPTION OF ITEM TO BE PURCHASED, BUILT, OR SERVICE TO BE PROVIDED:
Renovation Services, Ridgeway Head Start
4. NAME, ADDRESS, VENDOR NUMBER, AND EOC NUMBER OF VENDOR/CONSULTANT/AGENCY WITH WHICH SHELBY COUNTY WILL BE CONTRACTING:
Barnes & Brower, Inc.
3778 Burdan Cove
Memphis, TN 38118
VENDOR NO. 03912
EOC NO. EOC-C-209-13326
5. COST OF ITEM OR SERVICE REQUESTED: \$59,600.00
6. TERM OF PROPOSED CONTRACT/AGREEMENT: 1/01/08 thru 12/31/08
7. FUND, ORG, AND ACCOUNT NUMBER (13 DIGITS) **FOR MULTIPLE ACCOUNTS, PLEASE SPECIFY DOLLAR AMOUNT FOR EACH**
103-480350-7011
8. COMMODITY CODE: 909 00
9. VENDOR/CONSULTANT/AGENCY SELECTED BY (CHECK ONE):
PLEASE ATTACH APPROVAL DOCUMENTS
a. ☒ Bid/RFP Process - # & Date 4/03/08
b. ☐ Emergency/Sole Source
10. LOSB/MBE INFORMATION: Please check the appropriate description
☐ MBE (MINORITY OWNED BUSINESS ENTERPRISE)
☐ MALE ☐ FEMALE
☐ WBE (WOMEN OWNED BUSINESS ENTERPRISE)
☒ LOSB (LOCALLY OWNED SMALL BUSINESS)
ANNUAL SALES DOES NOT EXCEED \$3 MILLION
☐ N/A
11. SPECIAL INSTRUCTIONS (ROUTING, FUNDING, BUDGET TRANSFER IN PROCESS)

REVIEWED AND APPROVED BY:

ELECTED OFFICIAL


DEPARTMENT HEAD

12/1/08
DATE


DIVISION DIRECTOR

12/02/08
DATE